

Tab 7 – Intervention Selection Form Area 6 South Border
Laredo Only

Subpopulation: FMS Women Hispanic Ranking: 10

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| Name of Intervention | HIV Education Testing and Counseling |
| Risk Behavior(s) | Substance use Sex without condoms Multiple partners |
| Influencing Factor(s) or FIBs | Perceived susceptibility Environmental facilitators (access to condoms and testing) Knowledge of STDs Group or Cultural Norms |
| Intended Immediate Outcomes | Increase proportion of HIV -infected persons who know their status Increase condom use Improve communication and negotiation skills Improve self perception of risk Provide access to condoms and testing Improve knowledge of STDs Reduce Number of sex partners |
| Type | Individual Level |
| Setting | At the local health dept. and other testing sites. |
| Is this intervention currently being provided in your planning area? | The local health dept. does provided some services that assist this population. |
| Rationale for Selecting this Intervention | <ul style="list-style-type: none"> This intervention has clearly defined audience, goals, and objectives and is based on behavioral and social science theory. It also focuses on reducing risky behavior such as having sex without a condom and sharing unsterile works. <ul style="list-style-type: none"> Needs assessment and epi data indicated this group engages in unprotected sex. |

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| Name of Intervention S 5 | A Randomized Controlled Trail of a Behavioral Intervention to Prevent Sexually Transmitted Disease Among Minority Women |
| Risk Behavior(s) | Unprotected Sex Multiple partners |
| Influencing Factor(s) or FIBs | Stereotypical Beliefs, Mood, skills, social norms/peer pressure, sexual arousal, social policy, access, communication and negotiation, social inequalities |
| Intended Immediate Outcomes | To reduce HIV risk behaviors, increase HIV awareness, and promote the use of condoms |
| Type | Group Level Intervention |
| Setting | Institutions, Jails, Drug Rehabilitation Centers, and the local health dept |
| Is this intervention currently being provided in your planning area? | The local health dept. does provided some services that assist this population. |
| Rationale for Selecting this Intervention: | |

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| Name of Intervention S 5 | Condom Skills Education and Sexually Transmitted Disease Reinfection |
| Risk Behavior(s) | |
| Influencing Factor(s) or FIBs | Stereotypical Beliefs, Mood, skills, social norms/peer pressure, sexual arousal, social policy, access, communication and negotiation, relationship development |
| Intended Immediate Outcomes | To decrease high-risk sexual behavior, including unprotected sex associated with the drug use |
| Type | Group Level Intervention |
| Setting | Jails, Detention Centers, Rehabilitation Centers, and the local health dept. |
| Is this intervention currently being provided in your planning area? | The local health dept. does provided some services that assist this population. |
| Rationale for Selecting this Intervention: | |

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| Name of Intervention | Community Demonstration Projects |
| Risk Behavior(s) | <ul style="list-style-type: none"> ▪ Sex without condoms ▪ Sharing unsterile injection equipment |
| Influencing Factor(s) or FIBs | <ul style="list-style-type: none"> ▪ Self-efficacy, intentions, expected outcomes; ▪ Perceived susceptibility ▪ Cultural/group norms, peer pressure, social support ▪ Environmental facilitators (access to condoms & bleach kits) |
| Intended Immediate Outcomes | <p>Goal: To move participants from one stage of change to a higher stage of change (Pre-contemplation, contemplation, preparation, action, maintenance)</p> <p>Objectives: To increase condom use with main and non-main partners, to increase dis-infection of injecting equipment.</p> |
| Type | Community level |
| Setting | Street setting, PSEs, other community venues, Institutions, Jails, Drug rehab Centers, and Local Health Departments |
| Is this intervention currently being provided in your planning area? | NOT in most areas. Laredo Health Department does provide some services that assist this population. |
| Rationale for Selecting this Intervention: | <ul style="list-style-type: none"> • This intervention has clearly defined audience, goals, and objectives and is based on behavioral and social science theory. It also focuses on reducing risky behavior such as having sex without a condom and sharing unsterile works. • Needs assessment and epi data indicated this group engages in unprotected sex. ▪ This intervention is effective with all race/ethnicities |

Tab 7 – Intervention Selection Form
Valley Area Only

Subpopulation: FMS Women Hispanic Youth Ranking: 10

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| Name of Intervention | Comparison of Education versus Behavioral Skills Training Interventions in Lowering Sexual HIV-Risk Behavior of Substance-Dependent Adolescents |
| Risk Behavior(s) | <ul style="list-style-type: none"> ▪ Unprotected sex ▪ Multiple partners ▪ Substance abuse |
| Influencing Factor(s) or FIBs | <ul style="list-style-type: none"> ▪ Perceived susceptibility ▪ Attitudes ▪ Intentions ▪ Self-efficacy ▪ Outcome expectancies ▪ Interpersonal dynamics ▪ Substance abuse |
| Intended Immediate Outcomes | <p>Goal: To lower risk of HIV infection and transmission</p> <p>Objectives:</p> <ul style="list-style-type: none"> ▪ To increase self-efficacy skills ▪ To increase interpersonal skills |
| Type | GLI (separated by gender) |
| Setting | Substance abuse clinic (residential) |
| Is this intervention currently being provided in your planning area? | NO |
| Rationale for Selecting this Intervention: | <ul style="list-style-type: none"> ▪ This intervention has a clearly defined audience of substance-dependent adolescents, goals and objectives, and is based on the Social Learning Theory and the Theory of Reasoned Action. This intervention is focused on reducing unprotected sex, decreasing multiple sex partners, and reducing substance abuse. ▪ Epi and needs assessment data indicate this population engages in unprotected sex with multiple sex partners. ▪ Key informant interviews indicate an increase in HIV infection and risk activity among youth ages 13 – 24. |

Tab 7 – Intervention Selection Form
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Subpopulation: FMS Women Hispanic Ranking: 10

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| Name of Intervention | Enhancing Motivation to Reduce the Risk of HIV Infection for Economically Disadvantaged Urban Women |
| Risk Behavior(s) | <ul style="list-style-type: none"> ▪ Unprotected sex ▪ Multiple sex partners ▪ Substance abuse |
| Influencing Factor(s) or FIBs | <ul style="list-style-type: none"> ▪ Perceived susceptibility ▪ Self-efficacy ▪ Intentions ▪ Communication and negotiation skills ▪ Substance use ▪ Group norms ▪ Social support ▪ Sense of community ▪ Expected outcomes |
| Intended Immediate Outcomes | <p>Goal: To reduce HIV -related risk behavior</p> <p>Objectives:</p> <ul style="list-style-type: none"> ▪ To increase HIV -related knowledge ▪ To increase awareness of personal risk perception ▪ To combine motivational enhancement strategies with behavioral skills training |
| Type | Group (8-13) |
| Setting | Community-based organization |
| Is this intervention currently being provided in your planning area? | NO |
| Rationale for Selecting this Intervention: | <ul style="list-style-type: none"> ▪ This intervention has a clearly defined audience of low-income FMS women, goals and objectives, and is based on the Information-Motivation-Behavioral Skills Model and the Social-Cognitive Theory. This intervention is focused on increasing HIV -related knowledge, increase awareness of personal risk perception, and combining motivational enhancement strategies with behavioral skills training. ▪ Epi and needs assessment data indicate this population engages in unprotected sex with multiple sex partners. |

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| Name of Intervention | Project RESPECT |
| Risk Behavior(s) | Sex without condoms |
| Influencing Factor(s) or FIBs | <ul style="list-style-type: none"> ▪ Attitudes ▪ Group norms ▪ Intentions ▪ Self-efficacy ▪ Expected outcomes ▪ Perceived susceptibility |
| Intended Immediate Outcomes | To reduce high risk behaviors and prevent new STDs |
| Type | ILI (prevention counseling) |
| Setting | STD clinics |
| Is this intervention currently being provided in your planning area? | NO |
| Rationale for Selecting this Intervention: | <ul style="list-style-type: none"> • This intervention has a clearly defined audience of at-risk HIV - males and females. It also has clear goals and objectives (see outcomes) and is based on the behavioral and social science theories of Reasoned Action and Social Learning. The intervention focuses on reducing sex without condoms and provides opportunity to practice relevant skills. • Epi and needs assessment data show evidence that this population engages in unprotected sexual acts that are high-risk for HIV infection. |

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| Name of Intervention | Nosotras Viveremos |
| Risk Behavior(s) | Unprotected sex |
| Influencing Factor(s) or FIBs | Self-efficacy, self-esteem, expected outcomes perceived susceptibility social networks & social support cultural norms about sexuality & gender roles communication and negotiation skills interpersonal power dynamics environmental barriers or facilitators |
| Intended Immediate Outcomes | To increase knowledge re: HIV/STD transmission & prevention; to improve communication skills; to increase condom use among sexually active participants |
| Type | Group level |
| Setting | Varies |
| Is this intervention currently being provided in your planning area? | No |
| Rationale for Selecting this Intervention: | <ul style="list-style-type: none"> ▪ This intervention has a clearly defined audience of Latina farm workers, goals and objectives, and is based on the Diffusion Theory, Social Network Theory, and the Social Learning Theory. This intervention is focused on increasing HIV/STD-related knowledge, improve communications skills, and increase condom use among sexually active participants. ▪ Epi and needs assessment data indicate this population engages in unprotected sex with multiple sex partners. |

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Subpopulation: FMS Women Hispanic Ranking: 10

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| Name of Intervention | AIDS Education for Drug Abusers |
| Risk Behavior(s) | Unprotected sex Multiple Partners Injection Drug Use |
| Influencing Factor(s) or FIBs | Stereotypical Beliefs, Mood, skills, social norms/peer pressure, sexual arousal, social policy, access, communication and negotiation, relationship development |
| Intended Immediate Outcomes | To decrease high-risk sexual behavior, including unprotected sex associated with the drug use |
| Type | Group level |
| Setting | Jails, Detention Centers, Rehabilitation Centers, and the local health dept. |
| Is this intervention currently being provided in your planning area? | The local health dept. does provided some services that assist this population. |
| Rationale for Selecting this Intervention: | |

Tab 7 Intervention Selection Form Area 6 South Border

ALL HMAZs and the LMAZ

Subpopulation: All high priority subpopulations, consistent with CDC Guidance, September 1997

Rankings: Same as the corresponding group in selected HMAZ, LMAZ

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| Name of Intervention | Prevention Case Management (PCM) |
| Risk Behavior(s) | Multiple high risk behaviors consistent with HIV Prevention Case Management Guidance, September 1997 by the CDC Substance use Sex without condoms Multiple partners |
| Influencing Factor(s) or FIBs | Perceived susceptibility Fatalism Self Efficacy Peer Pressure Cultural group norms |
| Intended Immediate Outcomes | Increase condom use Decrease number of partners Increase Self Esteem Referral for new HIV positives into Early Intervention Programs Referral of HIV positives into more intensive Intervention Programs that address the Factors Influencing the Risky Behavior. |
| Type | Individual Level Intervention |
| Setting | Community based organization, STD clinics, other locations |
| Currently provided? | No |
| Rationale for selecting intervention: | This intervention should target only high-risk individuals, whether HIV -positive or HIV -negative, with multiple, complex problems and risk-reduction needs. This intensive, client-centered prevention activity has the fundamental goal of promoting the adoption and maintenance of HIV risk-reduction behaviors. It is suitable for individuals seeking stability and regularity in their lives and/or individuals who are reaching an action step in dealing with health concerns. PCM should include 1) client recruitment and engagement, 2) screening and assessment of HIV and STD risks and medical and psychosocial service needs, 3) development of a client-centered prevention plan, 4) multiple session HIV risk-reduction counseling, 5) active coordination of services with follow-up, 6) monitoring and reassessment of client's needs, risks, and progress, and 7) discharge from PCM services upon attainment and maintenance of risk-reduction goals. pcm |

Tab 7 Intervention Selection Form Area 6 South Border

ALL HMAZs and the LMAZ

Subpopulation: All BDTPS; all subpopulations; all races, ethnicities and ages
 Rankings: Same as the corresponding group in selected HMAZ, LMAZ

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| Name of Intervention | Prevention Counseling/Partner Elicitation |
| Risk Behavior(s) | Substance use Sex without condoms Multiple partners |
| Influencing Factor(s) or FIBs | Perceived susceptibility Environmental facilitators (access to condoms and testing) Knowledge of STDs Group or Cultural Norms |
| Intended Immediate Outcomes | Increase proportion of HIV-infected persons who know their status Increase condom use Improve communication and negotiation skills Improve self perception of risk Provide access to condoms and testing Improve knowledge of STDs Reduce Number of sex partners |
| Type | Individual Level Intervention |
| Setting | Community based organization, STD clinics, other community-based locations |
| Currently provided? | Yes |
| Rationale for selecting intervention: | <p>Counseling, testing, referral and partner services have been recommended as an effective intervention for all populations in Texas. In the Centers for Disease Control and Prevention's HIV Prevention Strategic Plan Through 2005, Goal 2 is to increase the proportion of HIV-infected people in the U.S. who know they are infected through voluntary counseling and testing. The CDC's objectives to meeting this goal support the inclusion of this intervention for all populations. These objectives include: improving access to voluntary, client-centered counseling and testing in high seroprevalance populations and increasing the number of providers who provide voluntary, client-centered counseling and testing. The core elements of this intervention include risk assessment, risk reduction plan, and the option to test for HIV either anonymously or confidentially.</p> <p>The Texas CPGs recommend the following strategies to promote PCPE: 1) Fact Sheet p. 31. Culturally Tailored HIV/AIDS Risk-Reduction Messages Targeted to African-American Urban Women. This 20-minute video increased the likelihood that women would view HIV as a personal risk, to</p> |

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| | <p>request condoms, to talk with friends about AIDS, and to get tested for HIV.</p> <p>2) Fact Sheet p. 34 Context Framing to Enhance HIV Antibody Testing Messages Targeted to African-American Women. This 25-minute video emphasizes the personal losses from not testing. Women were more likely to get tested and to talk to partners about testing after this video.</p> <p>3) Single session HIV/AIDS informational education: basic informational sessions discussing risks, correct condom and bleach kit use, referrals and the like enhance participants willingness to test either during or after the session.</p> <p>4) Bar outreach: sustained, consistent presence in a bar type setting enhances testing. The specific outreach that is known to work consisted of weekly presence in the bar, with an informational table, with staff present and interacting with bar managers, performers and patrons for 2-4 hours at a time. Testing was conducted at the bar or referral made to a community-based organization. Staff gained the trust of all through their sustained efforts.</p> <p>pcpe</p> |
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